MINUTES FROM NOV. 26, 2018, MEETING OF GOVERNOR'S COMMISSION ON BUILDING ACCESS TO COMMUNITY-BASED SERVICES

Submitted by Jill Fredel

Co-Chair Rita Landgraf, Director of UD's Partnership for Healthy Communities and Professor of Practice and Distinguished Health & Social Services Administrator in Residence at UD's College of Health Sciences, called the meeting to order at the Chapel on DHSS' Herman Holloway Campus.

Rita first mentioned the long-term steps forward, which likely will include a re-issuing of the Executive Order from the Governor laying out the priorities for the Commission and the appointment of new members by the Governor's Office.

Terri Hancharick moved that the minutes be approved; Tim Brooks seconded the motion. The motion was approved.

The group then turned to its ongoing work on its Strategic Plan. Rita then led a discussion on the Commission's Guiding Principles – a refresher on the previous work done by Commission members and other interested members of the public – on the basic rights for people with disabilities.

From there, the Commission began a recap of the strategic goals for 2018-22 (below) and members detailed the inventory highlights from their respective state divisions, agencies or councils. Rita asked the group to prioritize the top 3 goals out of the eight strategic goals. Those who completed the exercise were Tim, Dava, Terri, Marie, Melissa and Cara. For priority focus, Rita asked that those who could not attend the meeting to send her their top 3 goals – and why they chose those strategic goals – before the next meeting.

Rita said the Commission aligns most closely with the State Council for Persons with Disabilities, but it's important that the Governor's Commission not duplicate efforts. Rita said the Governor's Commission was created to come up with a community-based comprehensive plan – identify where there are gaps – inclusive of resources and legislative policy. "We want to support," she said. The question that members need to answer is: Where can the Governor's Commission lend value when agencies/councils are not achieving a goal for people with disabilities and their families? Where are there gaps in the work that the Commission can strategically address/own? Rita said she believes the Commission can add value, but the group needs to think strategically. The biggest goal needs to be achieving positive outcomes for people with disabilities, she said.

Rita and Terri Hancharick mentioned that John McNeal, director of the State Council for Persons with Disabilities (SCPD), will become the state's ADA (Americans with Disabilities Act) Coordinator full time, and Kyle Hodges will return to SCPD.

Rita then led a discussion about how should the Commission monitor for support and how should it advocate. She said the Commission's first strategic goal of advancing the transformation of health care delivery to respond and advance better outcomes for individuals with disabilities inclusive of long-term care and health equity could be good space for the Commission to begin.

In the Reflections portion of her presentation, she led a broad discussion about the past committee structure, what worked well and what could be improved, and what kind of structure does the Commission need moving forward. Do we wish to maintain a themed committee-based structure or initially perform the work within the Commission?

Secretary Walker thanked the group for the inventory and for consolidating the priorities. She said that work is important in advance of presenting a recommendation to the Governor. Daniese McMullin-Powell said she sees the Commission as a feedback loop.

For the next meeting in early 2019, Rita asked members who were not present to take time to choose their top three strategic goals of the eight that the Commission reviewed (below), to prioritize them in order and explain why they chose them, and to email her before the next meeting with their insights.

During Public Comment, Terri shared that the Center for Special Health Care Needs had opened and offered support for people with cerebral palsy and includes primary care.

Steve Groff said a work group on Children with Medical Complexity is continuing to meet after it issued its report.

The meeting was adjourned.



COMMISSION EXERCISE

Identify the top 3 goals, out of the 8 developed during our retreat, you believe the commission needs to prioritize

Why did you choose these goals?

Timeline FY 2018 - 2022

Goal 1: Advance the transformation of health care delivery to respond and advance better outcomes for individuals with disabilities inclusive of long term care and

health equity

Goal 2: Ensure a sufficient number of safe affordable integrated accessible **housing** options

Goal 3: Advance community planning that incorporated livable, walkable options as well as easily affordable and accessible **transportation** options

Goal 4: Advance education, inclusive of higher education and integrated employment initiatives

Goal 5: Ensure fiscal and human resources necessary to recruit, develop, retrain and advance a professional workforce — for early childhood, K-12; higher education and adult services inclusive of employment and residential supports

Goal 6: Provide leadership on disability issues through education, communication, and collaboration, inclusive of advancing policy and legislation both state side and federal side

Goal 7: Eliminate barriers to inclusion by increasing access to opportunities and independence for persons with

disabilities, with a heightened focus on **lifespan transitions**

Goal 8: Strengthen Our Impact on the Quality and Availability of Services and Supports for Individuals with Disabilities.

